2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 28, 2006 08:00 AN Secretary of State DOCUMENT # P95000017089 1. Entity Name HE-MAN LANDSCAPING, INC. Principal Place of Business Mailing Address 19511 STERLING DR 19511 STERLING DR MIAMI, FL 33157 MIAMI, FL 33157 01042006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0571773 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required The state of the s 6. Name and Address of Current Registered Agent DO NOT WRITE LESHER, RUSSELL S 19511 STERLING DR MIAMI, FL 33157 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150,00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME LESHER, RUSSELL S Translation of the property of 19511 STERLING DR STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33157 TITLE LESHER, TODD NUME STREET ADDRESS 19511 STERLING DR City-St-ZiP MIAMI, FL 33157 TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE MAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP MILE NAME STREET ADDRESS The state of the s

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Elegida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all given like empower80.

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR